

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ActBlue

Full Name (Last, First, Middle Initial)

A. RICK KARAM

Mailing Address 22401 BRUCE RD

City	State	Zip Code
BAY VILLAGE	OH	44140

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2015

Transaction ID : SB28A_33652019

Amount of Each Disbursement this Period

25.00

Refund of contribution, initially earmarked for FRIENDS OF SHERROD BROWN (C00264697)

Full Name (Last, First, Middle Initial)

B. RICK KARAM

Mailing Address 22401 BRUCE RD

City	State	Zip Code
BAY VILLAGE	OH	44140

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2015

Transaction ID : SB28A_35209015

Amount of Each Disbursement this Period

25.00

Refund of contribution, initially earmarked for FRIENDS OF SHERROD BROWN (C00264697)

Full Name (Last, First, Middle Initial)

C. RICK KARAM

Mailing Address 22401 BRUCE RD

City	State	Zip Code
BAY VILLAGE	OH	44140

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2015

Transaction ID : SB28A_33653279

Amount of Each Disbursement this Period

2.50

Refund of contribution, initially earmarked for ACTBLUE (C00401224)

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

52.50

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